## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Sc	chedule E)	FOR SE OF FORM 24/48
NΑ	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Future45		
		C C00574533
Ch	eck if 🔀 24-hour report 🗌 48-hour report 🔲 New report 🗌 Amends report filed	on Mam / Dad / Yayayay
	Full Name of Payee	Date of Public Distribution/Dissemination
	DDC	02 19 2016
	Mailing Address 805 15th Street, NW	Amount
	Suite 300	Amount
	City State Zip Code	19198.48
	Washington DC 20005	Transaction ID: 001 Date of Disbursement or Obligation
	Purpose of Expenditure Phone calls  Category/ Type  004	02 19 / 2016
	Name of Federal Candidate Support Office	e Sought: House District:
	Hillary Clinton Oppose	President Senate State: NV
	Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For:
	Full Name of Payee	Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
	Mailing Address	
		Amount
	City State Zip Code	
		Date of Disbursement or Obligation
	Purpose of Expenditure Category/	M M / D D / Y Y Y Y Y
	Type	
	Name of Federal Candidate Support Offic	e Sought: House District:
	Oppose	President Senate State:
	Calendar Year-To-Date Disb	ursement For: Primary General
	Per Election for Office Sought	Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures	19198.48
	(b) SUBTOTAL of Unitemized Independent Expenditures	
	(c) TOTAL Independent Expenditures	19198.48
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	Maria Wojciechowski  [Electronically Filed] Date	02 20 2016
	Signature	20 2010